

Vote:167 Jinja Referral Hospital

VI: Vote Overview

(i) Snapshot of Medium Term Budget Allocations

Table V1.1: Overview of Vote Expenditures

Billion Uganda Shillings	FY2018/19 Outturn	FY2019/20		FY2020/21 Proposed Budget	MTEF Budget Projections			
		Approved Budget	Spent by End Sep		2021/22	2022/23	2023/24	2024/25
Recurrent Wage	5.277	7.198	1.415	7.198	7.198	7.198	7.198	7.198
Non Wage	2.811	3.731	0.795	3.731	3.731	3.731	3.731	3.731
Devt. GoU	1.487	1.188	0.486	1.188	1.188	1.188	1.188	1.188
Ext. Fin.	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
GoU Total	9.575	12.117	2.696	12.117	12.117	12.117	12.117	12.117
Total GoU+Ext Fin (MTEF)	9.575	12.117	2.696	12.117	12.117	12.117	12.117	12.117
<i>A.I.A Total</i>	0.210	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Grand Total	9.785	12.117	2.696	12.117	12.117	12.117	12.117	12.117

(ii) Vote Strategic Objective

- To improve the quality and safety of hospital care by offering comprehensive specialised and general curative, promotive preventive and rehabilitative health care services.
- To contribute to scaling up critical HSSIP interventions.
- To strengthen research activities.
- To strengthen training of health workers.
- To strengthen collaboration with other hospitals and offer a supporting role to health facilities in the catchment area.
- To improve effectiveness and efficiency of hospital services.
- To strengthen hospital partnerships.

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V2: Past Vote Performance and Medium Term Plans

Performance for Previous Year FY 2018/19

Inpatients

Attended to 33,321 inpatients 9(an average of 92 daily) 82.9% average length of stay 4.6 days ,22,006operations both major and minor,6,535 deliveries 4904 normal deliveries

Outpatients

Attended to 173,943 out patients(average of 476.56 patients daily) 289,123 clients attended special clinics (average of 3212.48) 4,904 referrals in and 307 referrals out

Diagnostics

6631 clients received ultra sound services,(18.17 average)

Management:

1. Hospital Management Board meetings and 2 Committee sat. There was one special committee meeting. 32 senior management Meetings held; 168 Departmental meetings held; 11 contracts committee meeting were held; Conducted 14 Medicines and Therapeutic Committee meetings.
2. Utility payments (Yaka for power) and water bills were cleared for the Four quarters. But power blackouts reduced because the hospital has running generators thus increase in fuel consumption
3. Meals provided to 5,267 malnourished children, destitute s and urology patients.
Items already evaluated and are awaiting clearance for disposal; Final accounts prepared audited and verified;
- 4.The arrears ledgers prepared and submitted to Ernest and young for verification

Data Management

1. Weekly, monthly and quarterly reports submitted
2. Surveillance reports were produced and submitted to the DHIS 2 and captured in the (MTRAC); 10 HMIS Monthly and 4 HMIS quarterly reports were produced and submitted to (DHIS2)
3. Four In-house trainings in Data capture and reporting were held for 123 staff with support from RHITES Eastern On job mentor ship about data capture and report compilation by records team were done regularly.
4. Monthly data cleaning carried out in various data tools, Data used for reporting and giving updates; One quarterly data review meeting was held.Data quarterly analyzed and nonperforming departments encouraged to improve

Internal Audit:

- 1.The quarterly report produced for management review.
2. The PAC report was received and responses made, Clearance made through Ministry of Health. Management appeared before the PAC committee and issues raised handled collectively.
3. Exit meeting with the Auditor General was done and responses cleared. A report to PAC was provided and copies of responses delivered. Management was advised on risk mitigation and performance improvement. The implementation of these risk management activities area ongoing
4. The FY 2018/19 internal audit report was produced and circulated. Corrective actions taken and report reviewed; Stores were inspected; management was guided in areas of internal controls.
5. Value for money audit was done, the management report discussed and actions taken according to the recommendations; Auditor Generals reports and responses submitted to PAC.
- 6.The medical equipment workshop was audited and gaps found were fixed

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Performance as of BFP FY 2019/20 (Performance as of BFP)

Inpatients

10,056 clients were admitted, 4.5 days average length of stay ,105.8% bed occupancy rate ,3,828 operations both major and minor

Out Patients

34,046 patients attended spacial clinics,5,800 referrals in,25,008 general outpatients attended to, 680 clients received antenatal services,2,909 children immunized, 1,250 mothers received family planning services

Diagnostics:

1) 45,700 laboratory tests were done out of (220,000) annual planned 2) 4,414 X-ray investigations done out of (5,000) Planned . quarterly) 2750 Ultra sound examinations done out of 6500 planned annual.) 450 ECG tests done out of 520 planned quarterly. 5) 210 ECHOs tests done out of 280 planned quarterly)

Management:

1. 1 Hospital Management Board meetings and 1 Committee sat. There was one special committee meeting. 2 senior management Meetings held; 168 Departmental meetings held; 2 contracts committee meeting were held; Conducted 1 Medicines and Therapeutic Committee meetings.
2. Utility payments (Yaka for power) and water bills were cleared for the 1 quarters.
3. Daily morning meetings continued,Night,evening superintendence continued and daily reports provided
4. Compound ,wards cleaning continuously done
5. Quality assessment and improvement activities are progressively being done

Continued construction of 16 unit staff block, Timely payment of salary,wages ,gratuity and pension,improved staff motivation,encouraged more partnerships into operational research.Installed solar security lights at children's ward.Started on the process of government to government funding options

Medical Equipment workshop:

1. List of the required tools generated for possible support by the regional Partner (Rhites- East)
2. Local purchase orders issued for Electrical and Plumbing materials and some items already received and installed
3. Attended the Regional Medical Equipment Quarterly review meeting in Mbale;
- 4.Routine repairs and equipment maintenance in the hospital ie X- Ray, ICU and ECG,Echo machines
- 5.. Inventory entered on the NOMAD system and Inventory register being updated; User training routinely done for items like Pulse Ox-Meters
- 6..Production of oxygen from the oxygen plant has continued and its regular servicing done,.
- 7.One regional user training organized at Iganga hospital

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FY 2020/21 Planned Outputs

45,371 inpatients attended to, 8,750 operations 100% bed occupancy and 4.6 days average length of stay 25,000 referrals in

Out patients

240,000 out patients attended to, 325,000 clients will attend to specialized clinics, 5403 referrals in

Diagnostics

250,000 lab tests carried out 2,000 ecg and echo clients, 20,000 x-rays and 23,000 ultrasound test done

Audit

4 audit reports

Management

44 senior management meetings, 22 top management meetings

. Medical Equipment maintenance:

1) Strengthen a Regional Medical Equipment Maintenance workshop for Busoga Sub Region.

2) Procurement of assorted medical equipment spares including tools, purchase of central sterilization unit equipment, Ventilators for, ICU equipment, BP machines stretchers and trolleys ,

3) Repair and upgrade the oxygen plant and regular maintenance

4) Equipping high dependence units of the four major departments and training of staff in all emergency care.

Medium Term Plans

1. Improve hospital security by installing CCTV cameras, staff accommodation, rehabilitate existing infrastructure, reduce on costs of utilities by use rain water harvesting and solar power.

2. Reduce staff gaps by timely identification declaration and recruitment of staff within the allocated wage bill.

3. Strengthen and improve on data management, utilization and dissemination through digitization

4. Continue lobbying and fast tracking Phase Two hospital construction of the hospital to meet the client service demands especially and move to meet national demands of Jinja City with the entity serving as a Regional Center of Excellence 5. Continue developing and improving Specialized health care services, emergency and accident care, training and health research for improved livelihoods and labour productivity in the region.

Side rooms made functional for charging to increase revenue, quality improvement efforts strengthened, environmental friendly waste disposal methods supported, complete second phase of the staff house block, construct the wall fence around the hospital, construction and equipping the emergency unit, operational research activities given priority.

Efficiency of Vote Budget Allocations

Budget allocations are based on Jinja RRHs priorities which are derived from HSDP and NDP. Allocate funds to improve maternal and child health in the catchment area

Contribute to scaling up of health sector strategic interventions in order to improve the health of the community

Work towards prevention, management and control of communicable diseases

Empower and facilitate audit to improve effectiveness, efficiency and accountability of hospital operations

To support clinical departments by ensuring efficient, safe environment friendly health system infrastructure for smooth delivery of health services

Vote Investment Plans

Staff house construction, Private wing theater operations, Roofing of the main theater, remove the tiled roof and re-modelling the main operating theater, procurement of equipment's, renovation of structures

Major Expenditure Allocations in the Vote for FY 2020/21

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1. The entity continues to allocate resources to areas critical for inclusive and specialized service delivery, and provision of utilities and supplies for quality accessible and inclusive improved referral services to the population.
 2. Strengthening of Laboratory and Diagnostic services to improve on prescription; reduce medicine wastage and patient treatment outcomes. This will reduce patient hospital days(ALOS) and the associated costs on utilities and out of pocket.
 3. Focus will be geared to supporting community interventions (Specialist outreaches, surgical camps and media engagements) for social mobilization and sensitization on disease prevention especially to the most remote, vulnerable and neediest.
 4. Strengthening internal supervision for staff mentor ship, Training and service quality improvement and
 5. Support functionalise of the lower facilities in the region (General hospitals and HCIVs) to handle and manage simple cases, emergencies and improve on referrals of complicated cases (especially pregnant mothers and very sick children in order) to reduce maternal and child mortality in the region.
 6. Strengthen HIV services in the catchment area with the support of government to government funding
- Salary and wages, pension and gratuity, management operations, funds to clear, utility bills, staff house construction, procuring theatre equipment's, waste management, procurement of medicines

V3: PROGRAMME OUTCOMES, OUTCOME INDICATORS AND PROPOSED BUDGET ALLOCATION

Table V3.1: Programme Outcome and Outcome Indicators

Programme :	56 Regional Referral Hospital Services				
Programme Objective :	a. To improve the quality and safety of hospital services . b. To contribute to scaling up critical hssip interventions c. To strengthen research activities. d. To strengthen training of health workers. e. To strengthen collaboration with other hospitals and offer a supporting role to health facilities in the catchment area. f. To improve effectiveness and efficiency of hospital services. g. To strengthen hospital partnerships.				
Responsible Officer:	Dr. Nkuruziza Edward				
Programme Outcome:	Quality and accessible Regional Referral Hospital Services				
<i>Sector Outcomes contributed to by the Programme Outcome</i>					
1. Improved quality of life at all levels					
	Performance Targets				
Programme Performance Indicators (Output)	2019/20 Plan	2019/20 Q1 Actual	2020/21 Target	2021/22 Target	2022/23 Target
• Bed occupancy rate	85%	100%	85%	85%	86%

Table V3.2: Past Expenditure Outturns and Medium Term Projections by Programme

<i>Billion Uganda shillings</i>	2018/19	2019/20		2020/21	MTEF Budget Projections			
	Outturn	Approved Budget	Spent By End Q1	Proposed Budget	2021/22	2022/23	2023/24	2024/25
Vote :167 Jinja Referral Hospital								
56 Regional Referral Hospital Services	10.161	12.117	2.805	12.117	12.117	12.117	12.117	12.117
Total for the Vote	10.161	12.117	2.805	12.117	12.117	12.117	12.117	12.117

V4: SUBPROGRAMME PAST EXPENDITURE OUTTURNS AND PROPOSED BUDGET ALLOCATIONS

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Table V4.1: Past Expenditure Outturns and Medium Term Projections by SubProgramme

Billion Uganda shillings	2018/19	2019/20		2020/21	Medium Term Projections			
	Outturn	Approved Budget	Spent By End Sep	Proposed Budget	2021/22	2022/23	2023/24	2024/25
<i>Programme: 56 Regional Referral Hospital Services</i>								
01 Jinja Referral Hospital Services	8.503	10.773	2.302	10.780	10.780	10.780	10.780	10.929
02 Jinja Referral Hospital Internal Audit	0.010	0.021	0.017	0.012	0.012	0.012	0.012	0.000
03 Jinja Regional Maintenance	0.093	0.135	0.000	0.137	0.137	0.137	0.137	0.000
1004 Jinja Rehabilitation Referral Hospital	1.364	1.100	0.486	0.968	1.000	1.000	1.188	1.188
1481 Institutional Support to Jinja Regional Hospital	0.200	0.088	0.000	0.220	0.188	0.188	0.000	0.000
Total For the Programme : 56	10.171	12.117	2.805	12.117	12.117	12.117	12.117	12.117
Total for the Vote :167	10.171	12.117	2.805	12.117	12.117	12.117	12.117	12.117

N / A

Table V4.3: Major Capital Investment (Capital Purchases outputs over 0.5Billion)

FY 2019/20		FY 2020/21	
Appr. Budget and Planned Outputs	Expenditures and Achievements by end Sep	Proposed Budget and Planned Outputs	
Vote 167 Jinja Referral Hospital			
Programme : 56 Regional Referral Hospital Services			
Project : 1004 Jinja Rehabilitation Referral Hospital			
Output: 81 Staff houses construction and rehabilitation			
Completion of casting the slab of second floor and starting on the brick works of the same floor	Slab for the ground and first floor completed.Walling on the first ,form work for the second floor on going,	16 unit Staff house block constructed g	
Total Output Cost(Ushs Thousand):	1.100	0.486	0.818
Gou Dev't:	1.100	0.486	0.818
Ext Fin:	0.000	0.000	0.000
A.I.A:	0.000	0.000	0.000

V5: VOTE CHALLENGES FOR 2020/21 AND ADDITIONAL FUNDING REQUESTS

Vote Challenges for FY 2020/21

Limited budget to meet recurrent expenditures such as,purchase of drugs ,reasonable budget to cater for allowances for specialists es,budget to operationalize the the community health department ,lack of space for emergency care at pediatrics unit,land encroachment ,additional funding to cater for salaries for the private wing specialists

Table V5.1: Additional Funding Requests

Additional requirements for funding and outputs in 2020/21	Justification of requirement for additional outputs and funding
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Vote : 167 Jinja Referral Hospital	
Programme : 56 Regional Referral Hospital Services	
<i>OutPut : 05 Hospital Management and support services</i>	
Funding requirement UShs Bn : 1.300	Advocate to increase the ceilings to cater for procurement of drugs, facilitate specialists, utilize these funds to make the intensive care unit fully functional. These would help have increased outputs to emergency care
